

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

XGUO

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

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Establishm				Telephone Number	Date of Inspection PERMIT # (mm/dd/yr)			
Valley	View	G	olf Club	812 723 9280	1.0 242			
Establishm	ent Addre	ss (nu	mber and street, city, state, zip code)		11/18	12019	19-343	
3748	myc	Bu	J Rd. Flyds Krobs, W 471	15	1	•		
Owner			-	Purpose:	Follow-u	p Releas	se Date	
				1. Routine	No	10	days	
Owner's A	ddress			. Follow-up	Summary of Violations:			
				3. Complaint				
Person in C	Charge			4. Pre-Operational	$C \bigcirc NC \bigcirc R \bigcirc R$			
<u>Jalil</u>	Kha	_		5. Temporary	<u> </u>			
Responsibl	e Person's	t-ma	il	i i	Menu Type (See back of page)			
			· · · · · · · · · · · · · · · · · · ·	6. HACCP				
Certified F		-	(-1	7. Other (list)	12	3X	_45	
Varia	Wilk	vso.	(7/18/23)					
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"								
Section#	C/NC	R		rative	THE THE REAL PROPERTY.		orrected By	
Beetlon	Chite	1	1,41	rative		товесс	rrected By	
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			No violations. All com	ctions made.				
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Received by (name and title printed): Inspected by (name and title printed):								
_	14.11-	-1	and .	A.	A.J. Ingram (EHS)			
Received by	(signature)		<u> </u>	Inspected by (signature):	Inspected by (signature):			
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